

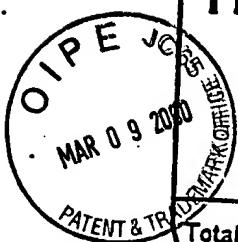
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PTO/SB/21 10/99

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)



Total Number of Pages in This Submission

12

Application Number	09/254,625
Filing Date	May 12, 1999
First Named Inventor	Hans-Peter Esser
Group Art Unit	1711
Examiner Name	P. Hampton-Hightower

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Checklist and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Remarks	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/>

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Stuart D. Frenkel, Esq., Reg. No. 29,500 Liniak, Berenato, Longacre & White, LLC
Signature	
Date	March 9, 2000

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name	<input type="text"/>
Signature	<input type="text"/>
	Date <input type="text"/>

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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/08-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 39.00)

Complete If Known

Application Number	09/254,625
Filing Date	May 12, 1999 MAR 09 2000
First Named Inventor	Hans-Peter Esser
Examiner Name	P. Hampton-Hightower
Group / Art Unit	1711
Attorney Docket No.	16202,160

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 50-0548
Deposit Account Name Liniak, Berenato, et. al.

Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17 Charges the Issue Fee Set In 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 790	201 395	Utility filing fee	
106 330	206 165	Design filing fee	
107 540	207 270	Plant filing fee	
108 790	208 395	Reissue filing fee	
114 150	214 75	Provisional filing fee	
SUBTOTAL (1) (\$)			

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
17	-20** = 0	x 9.00	= 0	
4	-3** = 1	x 39.00	= 39.00	
Multiple Dependent				

** or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103 22	203 11	Claims in excess of 20
102 82	202 41	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim, if not paid
108 82	208 41	** Reissue independent claims over original patent
110 22	210 11	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		39.00

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	
127 80	227 25	Surcharge - late provisional filing fee or cover sheet	
138 130	138 130	Non-English specification	
147 2,520	147 2,520	For filing a request for reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 400	216 200	Extension for reply within second month	
117 850	217 475	Extension for reply within third month	
118 1,510	218 755	Extension for reply within fourth month	
128 2,080	228 1,030	Extension for reply within fifth month	
119 310	219 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,320	241 660	Petition to revive - unintentional	
142 1,320	242 860	Utility issue fee (or reissue)	
143 450	243 225	Design issue fee	
144 870	244 335	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Petitions related to provisional applications	
128 240	128 240	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
148 780	248 385	Filing a submission after final rejection (37 CFR 1.128(a))	
149 780	249 385	For each additional invention to be examined (37 CFR 1.128(b))	

Other fee (specify) _____

Other fee (specify) _____

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Typed or Printed Name

Stuart D. Frenkel, Esq.

Complete (if applicable)

Reg. Number

29,500

Signature

Stuart D. Frenkel

Date 3/9/2000

Deposit Account User ID

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